


**SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS**  
**OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30**

1. REQUISITION NUMBER

PAGE 1 OF

|   |                         |                 |  |                               |
|---|-------------------------|-----------------|--|-------------------------------|
| 2. CONTRACT NO.   | 3. AWARD/EFFECTIVE DATE | 4. ORDER NUMBER | 5. SOLICITATION NUMBER                 | 6. SOLICITATION ISSUE DATE    |
| 7. FOR SOLICITATION INFORMATION CALL:  | a. NAME                 |                 | b. TELEPHONE NUMBER (No collect calls) | 8. OFFER DUE DATE/ LOCAL TIME |

|              |      |  |  |
|--------------|------|--|--|
| 9. ISSUED BY | CODE |  | 10. THIS ACQUISITION IS <input type="checkbox"/> UNRESTRICTED OR <input type="checkbox"/> SET ASIDE: _____ % FOR:<br><input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> WOMEN-OWNED SMALL BUSINESS (WOSB)<br><input type="checkbox"/> HUBZONE SMALL BUSINESS <input type="checkbox"/> ECONOMICALLY DISADVANTAGED NAICS:<br><input type="checkbox"/> SERVICE-DISABLED VETERAN-OWNED WOMEN-OWNED SMALL BUSINESS (EDWOSB) UNDER THE WOMEN OWNED SMALL BUSINESS PROGRAM SIZE STANDARD:<br><input type="checkbox"/> 8 (A) |
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| 11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED<br><input type="checkbox"/> SEE SCHEDULE | 12. DISCOUNT TERMS | 13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700) <input type="checkbox"/> | 13b. RATING  |
|  |                    |  | 14. METHOD OF SOLICITATION<br><input type="checkbox"/> RFQ <input type="checkbox"/> IFB <input type="checkbox"/> RFP |

|                |      |  |                     |      |  |
|----------------|------|--|---------------------|------|--|
| 15. DELIVER TO | CODE |  | 16. ADMINISTERED BY | CODE |  |
|----------------|------|--|---------------------|------|--|

|                          |      |  |               |  |                              |      |  |
|--------------------------|------|--|---------------|--|------------------------------|------|--|
| 17a. CONTRACTOR/ OFFEROR | CODE |  | FACILITY CODE |  | 18a. PAYMENT WILL BE MADE BY | CODE |  |
|--------------------------|------|--|---------------|--|------------------------------|------|--|

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|---------------|--|--|
| TELEPHONE NO. | 17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER <input type="checkbox"/> | 18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED <input type="checkbox"/> SEE ADDENDUM |
|---------------|--|--|

| 19. ITEM NO.   | 20. SCHEDULE OF SUPPLIES/SERVICES | 21. QUANTITY | 22. UNIT | 23. UNIT PRICE | 24. AMOUNT |
|--|-----------------------------------|--------------|----------|----------------|------------|
| (Use Reverse and/or Attach Additional Sheets as Necessary) |                                   |              |          |                |            |

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|---------------------------------------|---|
| 25. ACCOUNTING AND APPROPRIATION DATA | 26. TOTAL AWARD AMOUNT (For Govt. Use Only) |
|---------------------------------------|---|

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| <input type="checkbox"/> 27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4. FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED | <input type="checkbox"/> 27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4. FAR 52.212-5 IS ATTACHED. ADDENDA <input type="checkbox"/> ARE <input type="checkbox"/> ARE NOT ATTACHED |
|---|--|

|  |   |
|--|---|
| <input type="checkbox"/> 28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN _____ COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED | <input type="checkbox"/> 29. AWARD OF CONTRACT: REF. _____ OFFER DATED _____. YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN, IS ACCEPTED AS TO ITEMS: |
|--|---|

|   |                  |  |                  |
|---|------------------|--|------------------|
| 30a. SIGNATURE OF OFFEROR/CONTRACTOR          |                  | 31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) |                  |
| 30b. NAME AND TITLE OF SIGNER (Type or print) | 30c. DATE SIGNED | 31b. NAME OF CONTRACTING OFFICER (Type or print)                 | 31c. DATE SIGNED |